September 30, 1998

TO: All Medicare Providers

FROM: Program Relations

SUBJECT: IMPORTANT INFORMATION ABOUT INFLUENZA AND PPV INJECTIONS

ATTENTION MEDICARE BUSINESS OFFICE MANAGER: Please distribute to all appropriate health care facility personnel.

Immunize Your Patients Against Influenza and Pneumococcal Pneumonia!

The flu season is here! Please remember to promote influenza and pneumococcal vaccinations, both Medicare Part B covered preventive health care benefits. These vaccines greatly reduce hospital admissions for pneumonia and deaths due to complications from influenza. Research shows that a provider’s recommendation appears to be a strong motivator for a patient to get vaccinated. Research also shows that systems-oriented, provider and beneficiary interventions, or a combination of all three, work in promoting these two vaccinations.

Standing orders are one example of a systems-oriented intervention that a hospital, public health clinic, nursing home, or home health agency can use to increase immunization rates. For example, a physician could write a standing order in the hospital inpatient setting requiring the assessment and vaccination of all Medicare patients. A missed opportunity in the inpatient hospital setting occurs when a beneficiary is discharged without being offered and receiving an influenza and/or pneumococcal vaccination. Missed opportunities can often result in a beneficiary being readmitted to a hospital for influenza and related illnesses, like pneumonia. Unfortunately, missed vaccination opportunities occur in all settings. Systems-oriented interventions, like standing orders, are one way of reducing missed opportunities. Please note that a standing order is not required for Medicare coverage of influenza immunizations, but it is required for coverage of pneumococcal vaccinations.

Provider and beneficiary interventions are also effective in reducing missed vaccination opportunities. Physicians and their office personnel can promote influenza and pneumococcal vaccinations by hanging posters on their walls as a reminder to them and their patients, and using wall charts to track immunizations. Most importantly, physicians can make influenza and pneumococcal vaccinations available in their office or refer patients to other health care providers for these vaccinations. Beneficiary interventions, like direct mail and phone calls, are also worthwhile. Postcards and phone calls to beneficiaries help remind them to get vaccinated.

A combination of system, provider and beneficiary interventions has been proven effective in increasing immunization rates, especially when the provider intervention is part of the strategy. Simply put, Medicare beneficiaries are most likely to get immunized when their physician specifically recommends vaccination. We ask that providers realize their significant roles and discuss and promote influenza and pneumococcal vaccinations with their patients.
Please remember that while influenza immunizations are seasonal and should be given every year in the fall, pneumococcal vaccinations can be given at any time of the year. Generally, one pneumococcal vaccination after the age of 65 is all that a person needs to protect themselves for a lifetime. However, persons who are considered at highest risk, like persons with chronic illnesses, like diabetes, and cardiovascular or pulmonary disease, and people with compromised immune systems, like chronic renal failure, should ask their doctor if a booster pneumococcal vaccination is necessary. If any person 65 and over is unsure of their pneumococcal vaccination status, revaccination is recommended and will be covered by Medicare Part B.

Your Medicare contractor can provide you with brochures and posters free-of-charge to display in your offices to promote both influenza and pneumococcal vaccinations. To request these materials, or for instructions on how to bill Medicare for influenza and pneumococcal vaccinations, please call the Provider Customer Service Department at (904) 355-8899. Thank you for your help in bringing this important preventive health care benefit to Medicare beneficiaries.

Note: Providers who need further information about billing for influenza or pneumococcal vaccinations should refer to one of the following sources:

- Their Medicare Provider Manual
- The Medicare Online Bulletin Board System (BBS)
- Bulletin #G310, published December 12, 1997 (copies available through the Provider Customer Service Department)